

HIV/AIDS among Hispanics/Latinos

CDC HIV/AIDS FACTS

APRIL 2008

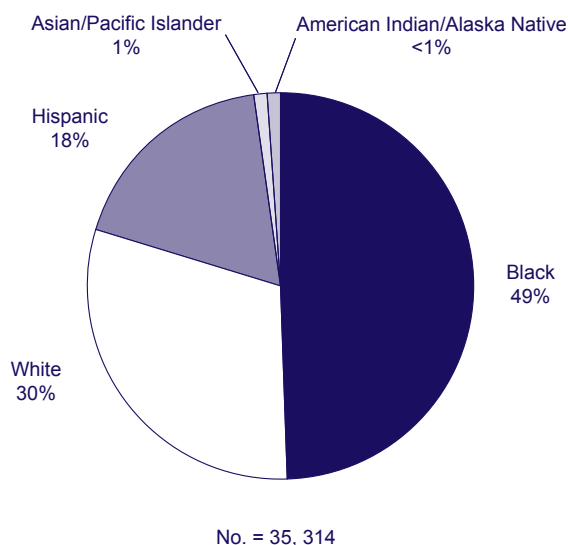
The HIV/AIDS epidemic is a serious threat to the Hispanic/Latino community. In 2005, HIV/AIDS was the fourth leading cause of death among Hispanic/Latino men and women aged 35 to 44 [1].

THE NUMBERS

HIV/AIDS in 2006

- Hispanics/Latinos accounted for 18% of the 35,314 new HIV/AIDS diagnoses in 33 states with long-term, confidential name based HIV reporting [2].
- Hispanics/Latinos accounted for 17% of the 491,727 persons (including children) living with HIV/AIDS in the 33 states [2].
- For Hispanic/Latino men living with HIV/AIDS, the most common methods of HIV transmission were (in order) sexual contact with other men, injection drug use, and high-risk heterosexual contact. For Hispanic/Latina women living with HIV/AIDS, the most common methods of transmission were high-risk heterosexual contact and injection drug use [2].

Race/ethnicity of persons (including children) with HIV/AIDS diagnosed during 2006



Based on data from 33 states with long-term, confidential name-based HIV reporting.

AIDS in 2006

- Hispanics/Latinos accounted for 19% of new AIDS diagnoses and 19% of all people living with AIDS in the 50 states and the District of Columbia [2].
- Of the rates of AIDS diagnoses for adults and adolescents in all racial and ethnic groups, the second highest (after the rate for blacks) was the rate for Hispanics/Latinos [2].
- Although Hispanics/Latinos made up only about 13% of the population of the United States, they accounted for 16% of the estimated 982,498 AIDS cases diagnosed in the 50 states and the District of Columbia since the beginning of the epidemic [2].
- By the end of 2006, an estimated 80,690 Hispanics/Latinos with AIDS in the 50 states and the District of Columbia had died [2].

PREVENTION CHALLENGES

A number of cultural, socioeconomic, and health-related factors contribute to the HIV epidemic and prevention challenges in the US Hispanic/Latino community.

- **Behavioral risk factors** for HIV infection differ by country of birth. For example, data suggest that Hispanics/Latinos born in Puerto Rico are more likely than other Hispanics/Latinos to contract HIV as a result of injection drug use or high-risk heterosexual contact. By contrast, sexual contact with other men is the primary cause of HIV infections among Hispanic/Latino men born in Central or South America, Cuba, Mexico, or the United States [2].
- Hispanic/Latina women and Hispanic/Latino men are most likely to be infected with HIV as a result of **sex with men** [2]. Therefore, prevention program staff need to address issues specific to the Hispanics/Latinos to whom a particular program is directed: for example, condom usage (men and women) or the balance of power within relationships (especially women).
- **Injection drug use** continues to be a risk factor for Hispanics/Latinos, particularly those living in Puerto Rico [2]. Both casual and chronic substance users are



1-800-CDC-INFO (232-4636)
In English, en Español
24 Hours/Day
cdcinfo@cdc.gov
<http://www.cdc.gov/hiv>



REFERENCES

1. CDC. WISQARS [Web-based Injury Statistics Query and Reporting System] leading causes of death reports, 2005. <http://webapp.cdc.gov/sasweb/ncipc/leadcaus10.html>.
2. CDC. HIV/AIDS Surveillance Report, 2006. Vol 18. US DHHS, CDC; 2008:1-55. <http://www.cdc.gov/hiv/topics/surveillance/resources/reports>.
3. CDC. Sexually Transmitted Disease Surveillance, 2006. Atlanta: US DHHS, CDC; 2007. <http://www.cdc.gov/std/stats/toc2006.htm>.
4. DeNavas-Walt C, et al. Income, Poverty, and Health Insurance Coverage in the United States: 2004. Washington, DC: US Government Printing Office; 2005. Current Population Reports P60-229. <http://www.census.gov/prod/2005pubs/p60-229.pdf>.

more likely to engage in risky sexual behaviors, such as unprotected sex, when they are under the influence of drugs or alcohol.

- The rates of **sexually transmitted diseases**, which can increase the chances of contracting HIV, are higher for Hispanics/Latinos. In 2006, the rate of chlamydial infection for Hispanics/Latinos was about 3 times the rate for whites (not Hispanic/Latino), and the rates of gonorrhea and syphilis for Hispanics/Latinos were about twice the rates for whites [3].
- Certain **cultural beliefs** can affect one's risk for HIV infection. For example, among men, *machismo* has positive implications for HIV prevention, such as strength and protection of the family; however, proving masculinity through power and dominance can lead both straight and gay Hispanic/Latino men to engage in risky sexual behavior.
- Greater **acculturation into the US culture** has both negative (engaging in behaviors that increase the risk for HIV infection) and positive (communicating with partners about practicing safer sex) effects on the health behaviors of Hispanics/Latinos.
- More than 1 in 5 (21.9%) Hispanics/Latinos live in **poverty** [4]. Problems associated with poverty, including unemployment, a lack of formal education, inadequate health insurance, and limited access to high-quality health care, can increase the risk for HIV infection.
- The **migration patterns, social structure, language barriers, and lack of regular health care** among transient Hispanic/Latino immigrants can affect awareness and hinder access to HIV/AIDS prevention and care.

WHAT CDC IS DOING

To reduce the incidence of HIV infection, CDC released *Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings* in 2006. These new recommendations advise routine HIV screening for adults, adolescents, and pregnant women in health care settings in the United States. CDC also

- Conducts epidemiologic and behavioral research focused on Hispanics/Latinos
- Supports efforts to reduce the health disparities experienced in the communities of minority races and ethnicities at high risk for HIV infection
- Provides effective, scientifically based interventions to organizations serving Hispanics/Latinos and is tailoring other effective behavioral interventions to Hispanics/Latinos who are at high risk for HIV infection
- Builds the capacity of programs that serve Hispanics/Latinos through partnerships with national, regional, and nongovernmental organizations

In 2006, CDC provided 56 awards to community-based organizations in the United States and Puerto Rico that focus primarily on Hispanics/Latinos. CDC also provides funding through state, territorial, and local health departments to organizations serving this population. In addition, CDC provides training for researchers of minority races/ethnicities and in 2002 established the Minority HIV/AIDS Research Initiative (MARI) to create partnerships between CDC epidemiologists and researchers who are members of minority races and ethnicities and who work in communities of color. CDC invests \$2 million per year in the program and since 2003 has funded 13 junior investigators at 12 sites across the country.

HIV/AIDS RESOURCES

CDC HIV/AIDS

<http://www.cdc.gov/hiv>
CDC HIV/AIDS resources

CDC-INFO

1-800-232-4636

Information about personal risk and where to get an HIV test

CDC National HIV Testing Resources

<http://www.hivtest.org>

Location of HIV testing sites

CDC National Prevention Information Network (NPIN)

1-800-458-5231

<http://www.cdcnpin.org>

CDC resources, technical assistance, and publications

AIDSinfo

1-800-448-0440

<http://www.aidsinfo.nih.gov>

Resources on HIV/AIDS treatment and clinical trials

For more information on HIV/AIDS and Hispanics/Latinos, visit <http://www.cdc.gov/hiv/hispanics>. For more information on the 33 states with long-term, confidential name-based HIV reporting, visit <http://www.cdc.gov/hiv/topics/surveillance>.